

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: Christopher L. Hill, Garry E. Korbel

Application No.: 09/995,206

Filed: 11/27/01

For: POWER SUPPLY OUTPUT CONTROL APPARATUS AND METHOD

**CERTIFICATE OF EFS SUBMISSION (37 C.F.R. § 1.8(a)(i)(1)(C))**

I hereby certify that on April 30, 2009 the following correspondence:

Name of Paper: Amendment and Transmittal

Number of Pages: 12

Fees: Extension of Time

Amount: \$1,110.00

Payment By: Credit Card

is being submitted to the Patent and Trademark Office via the Office Electronic Filing System in accordance with § 1.6(a)(4) at \_\_\_\_\_ local time.

  
\_\_\_\_\_  
Signature

Telephone Number: 405-232-0621

Diana C. Anderson  
\_\_\_\_\_  
Type or print name of person certifying

***NOTE:*** It is advisable to keep a copy of certification of EFS-Web transmission § 1.8), including the list of papers submitted, to establish the local time of the submissions if such evidence is needed

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: **Christopher L. Hill and Garry E. Korbel**  
 Assignee: **SEAGATE TECHNOLOGY LLC**  
 Application No.: **09/995,206** Group No.: **2837**  
 Filed: **11/27/2001** Examiner: **Erick Glass**  
 For: **POWER SUPPLY OUTPUT CONTROL APPARATUS AND METHOD**

**Mail Stop Amendment**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, VA 22313-1450**

**AMENDMENT TRANSMITTAL**

1. Transmitted herewith is an amendment for this application.

**STATUS**

2. Applicant is other than a small entity.

**EXTENSION OF TERM**

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)(1)-(4)) for three months:  
**Fee: \$1,110.00**

**FEE FOR CLAIMS**

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)	(Col. 2)	(Col. 3)	OTHER THAN A SMALL ENTITY			
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE		
TOTAL	24	– 30	= 0	x \$ 52.00	= \$		0.00
INDEP.	4	– 6	= 0	x \$ 220.00	= \$		0.00
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				+ \$ 0.00	= \$		0.00
				TOTAL ADDIT. FEE	\$		0.00

No additional fee for claims is required.

### **FEE PAYMENT**

5. Authorization is hereby made to charge the amount of \$1,110.00 to Credit card as shown on the attached electronic credit card information authorization.

Charge any additional fees required by this paper or credit any overpayment to Deposit Account 06-0540.

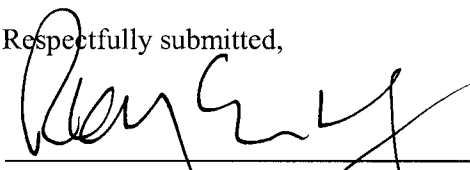
### **FEE DEFICIENCY**

6. If an additional extension and/or fee is required, charge Account No. 06-0540.  
If an additional fee for claims is required, charge Account No. 06-0540.

Date:

4/30/09

Respectfully submitted,



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